## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

P-3571-US

| CLAIMS AS FILED - PART I<br>(Column 1)   |  |                                  |                    |                       |                              | nn 2)            |          | SMALL ENTITY        |                        | OR      | OTHER THAN<br>OR SMALL ENTITY |   |
|--|--|----------------------------------|--------------------|-----------------------|------------------------------|------------------|----------|---------------------|------------------------|---------|-------------------------------|---|
| -TOTAL CLAIMS  |  |                                  | 51                 |                       |                              |                  |          | RATE                | FEE                    |         | RATE                          | FEE   |
| FO   | R  |                                  | NUMBER FILED       |                       | NUMBER EXTRA                 |                  | ļ ·      | BASIC FEE           | 355.00                 | OR      | BASIC FEE                     | 710.00  |
| то   | TAL CHARGEA                                    | BLE CLAIMS                       | 5 minus 20=        |                       | . 31                         |                  |          | X\$ 9=              |                        | OR      | X\$18=                        | ((5   |
| IND  | EPENDENT CL                                    | AIMS                             | <b>√</b> minus 3 = |                       | 2                            |                  |          | X40=                |                        | OR      | X80=                          | 160   |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |                                  |                    |                       |                              |                  |          | +135=               |                        | OR      | +270=                         | - 100   |
| * If the difference in column 1 is less than zero, enter   |  |                                  |                    |                       |                              | olumn 2          | -        | TOTAL               |                        | OR      | TOTAL                         | 1428  |
| CLAIMS AS AMENDED - PART II  |  |                                  |                    |                       |                              |                  |          | 122                 |                        | ,       | OTHER                         | <del>                                      </del> |
| <del></del>  | •  | (Column 1)                       | <u> </u>           | (Colu                 | nn 2) (Column 3)             |                  |          | SMALL               |                        | OR      | SMALL                         |   |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT  |                    | NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE                            |
|  | Total  | · 66                             | Minus              | 6                     | 51                           | = 15             |          | X\$ 9=              |                        | OR      | X\$18=                        |   |
|  | Independent                                    | · 8                              | Minus              | ***                   | 5                            | = 9              |          | X40=                |                        | OR      | X80=                          |   |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                    |                       |                              |                  |          | +135=               | ·                      | OŘ      | +270=                         | ·   |
|  |  |                                  |                    |                       | •                            |                  |          | TOTAL<br>ADDIT, FEE |                        | OR      | TOTAL<br>ADDIT. FEE           |   |
|  | (Column 1) (Column 2) (Column 3)               |                                  |                    |                       |                              |                  |          |                     |                        |         | ·<br>                         |   |
| AMENDWENT'B  |  | CLAIMS REMAINING AFTER AMENDMENT |                    | NUM<br>PREVI          | IEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE                            |
| Z QZ   | Total  | . 54                             | Minus              | ** (                  | 66                           | = ·              |          | X\$ 9=              |                        | OR      | X\$18=                        |   |
|  | Independent                                    | . 6                              | Minus              | 200                   | 8                            | <u> -</u>        |          | X40=                | ·                      | OR      | X80=                          | • • • •   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                                  |                    |                       |                              |                  |          | +135=               |                        | OR      | +270=                         |   |
|  |  |                                  |                    |                       |                              |                  |          | TOTAL               |                        | OR      | TOTAL                         |   |
| 1020 (Column 1) (Column 2) (Column 3)  |  |                                  |                    |                       |                              |                  |          | ADDIT. FEE          |                        | JON     | ADDIT. FEE                    |   |
|  | bally  | (Column 1)<br>CLAIMS             | 7                  | HIGH                  | TEST                         | (Column 3)       | <b>ጎ</b> | <u> </u>            | ADDI-                  | )       | <del></del>                   | ADDI-   |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT  | ·                  | PREVI                 | IBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA |          | RATE                | TIONAL<br>FEE          |         | RATE                          | TIONAL<br>FEE:                                    |
|  | Total  | . 54                             | Minus              | ••                    | 66                           | • _              |          | X\$ 9=              |                        | OR      | X\$18=                        | 193 <b>7</b> 5-31                                 |
|  | Independent                                    | · 6                              | Minus              | ***                   | 8                            | <u> -</u>        | ╣        | X40=                |                        | OR      | X80=                          |   |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                    |                       |                              |                  |          | +135=               |                        |         | +270=                         |   |
| ٠  |  |                                  |                    |                       |                              |                  |          |                     |                        | OR      | TOTAL                         |   |
| "If the entry in column 1 is less than the entry in column 2, write "or in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                                  |                    |                       |                              |                  |          |                     |                        |         |                               |   |
| ١  | The Highest Nun                                | nber Previously Pa               | e For (Total o     | r independ            | ienii) is the                | nignest numb     |          | nuo iu iue abt      | Nobuste oo             | . us co | numur t.                      | · · · .   |